

## MINUTES

### Health Information Technology Standards Advisory Committee (HITSAC)

Thursday, April 21, 2011

Virginia Information Technologies Agency VITA)  
Commonwealth Enterprise Solutions Center  
Washington Conference Room  
11751 Meadowville Lane, Chester, Virginia 23836

#### ATTENDANCE:

##### Members Present:

Dr. Marshall Ruffin, Chair  
Geoff Brown  
Rich Pollack

##### Members Absent:

John Quinn

##### Others Present:

Susan McCleary, VITA/EAD, HITSAC Admin.  
Akeisha Heard, VITA/EAD  
Dave Mix, DMAS  
Kim Barnes, Office of Health IT, Director  
Karen Jackson, Deputy Secretary of Technology  
Jerry Simonoff, VITA/ESG, Director  
Fred Norman, CVC  
Anna James, Troutman Sanders

Jaime Woltz, CGI  
Lesliann Helmus, VDH  
Jason Hall, VDH  
David Andrews, Accenture  
Lynne Jeffries, VITA/PMD  
Vickie Tyson, DCLS  
Chris Whyte, Vector Corp.  
Jan Butterfield

#### Call to Order:

Chairman Marshall Ruffin called the meeting to order at 10:35 a.m. in room 1222 at the Commonwealth Enterprise Solutions Center (CESC) in Chester, VA. Dr. Ruffin welcomed the Committee.

#### OLD BUSINESS:

##### Approval of Minutes of March 17, 2011 HITSAC meeting

Chairman Ruffin asked the Committee if there were any additions or changes to the Minutes. The Committee responded that there were none and the Minutes of March 17, 2011 were unanimously adopted.

##### Recommendations for Filling Vacancy on HITSAC

Chairman Ruffin noted that Mr. Brown is resigning from the Committee and that the Committee will send two names to the Information Technology Advisory Council (ITAC) for approval. Mr. Brown will

continue to serve the Commonwealth as Chairman of the Technology Subcommittee for Governor McDonnell's task force on Health Care Reform. Dr. Ruffin stated that the first candidate is Dr. James Harrison from UVA and the second is Dr. Sallie Cook from VHQC. Chairman Ruffin said that the Secretary of Health and Human Resources, Dr. Hazel, requested that a third person be considered, Dr. Kay Stout, who is an OB/GYN with an MBA from William and Mary. He remarked that Dr. Stout has led the implementation of electronic records and, health information exchange for three hospitals and three or four practice sites in northern VA towards. Chairman Ruffin was informed by Dr. Stout that six hours every third Thursday of the month would be a challenge but, if the Committee thinks that her background is worthy of HITSAC, and ITAC approves, she will certainly do her best to serve. A motion was made to consider Dr. Stout as a candidate; the motion was seconded and approved. Chairman Ruffin stated that her name will be sent along with the other two candidates to Dr. Hazel for submission to ITAC.

Ms. Barnes requested to make a comment. She stated that she had a conversation with the HIE project manager at ONC and they would like to do a site visit. Ms. Barnes mentioned that she would like ONC to be privy to a HITSAC meeting. The Committee agreed that ONC's attendance would be welcomed. Ms. McCleary took an action item to add an ONC agenda item as well as include time for discussion, questions and answers amongst the members of ONC and HITSAC.

Chairman Ruffin announced that the COV-HIE Topic Report has been approved and that ONC needed to be informed of this.

### **Draft Governance Framework**

Ms. McCleary noted that this is the second time the Committee has looked at the *Draft Governance Framework* and once the Committee approves, it will be forwarded to the CIO. The Committee discussed the Draft item by item.

Purpose: The Purpose Statement remained the same.

Definitions: The distinction between **Data Owner** and **Data Steward** was discussed. Mr. Pollack noted that these are two distinctive areas – one entity (the *data owner*) may own a data set, but IT personnel manage, correct and oversee the use of the data set (the *data steward*). It was noted that in state government, the **data owners** tend to be more on the business side and may not necessarily understand the technical details of the data, whereas the **data stewards** are likely to have more technical expertise and can easily maneuver through the data fields.

Statement of Policy: After discussion, the Committee agreed that the Statement of Policy will be changed to read as follows: ***To ensure semantic interoperability within state government and between state government and external partners, the Commonwealth will adopt or adapt and implement external standards and implementation guides. Internal standards and implementation guides will only be developed when no applicable external standards exist. Pursuant to §2.2-225 of the Code of Virginia, the Secretary of Technology will and must approve the adoption and definition of all standards for electronic information exchange.***

Mr. Mix wondered how this information will be communicated to the clinical community as there needs to be a significant lead time before new standards are implemented. Ms. Jackson stated it would be the responsibility of HHR to get the Standards disseminated. Ms. Barnes indicated that the Office of Health IT has the responsibility to communicate these standards to providers and payers.

Roles: VITA – The Committee agreed that the first bullet point will read, ***Coordinates and oversees the consideration and adoption of external standards and approval of internal standards and their corresponding implementation guides and specifications.***

Procedures: The Committee agreed to make the following changes:

- The subheading will now read, ***New External Standard and Associated Implementation Guides.*** This will make it consistent with the language the Committee approved for Roles.
- The language in Step 9 was changed to, *Within 60 days of the close....*
- Internal Standards, by definition, would not have an implementation guide until it is created. The new title here will be, ***New Internal Standard and Associated Implementation Guide.***
- Step 7 was changed to read, *Within 60 days...;*
- Step 9 was changed to read, *Within 60 days....*
- Step 8 was left as is.
- Regarding Exception Requests, the Committee felt it would be important to be explicit with a timeline to avoid procrastination. Step 3 will be changed to read as follows, ***VITA will prepare a recommendation and submit it to the CIO with all due haste.***

The Committee agreed the new Draft should be circulated to Agencies for comment prior to the next HITSAC meeting.

The above changes to the Draft were unanimously adopted by the Committee.

#### **DEFERRED from March 17, 2011 Meeting:**

#### **Data Use and Reciprocal Support Agreement (DURSA) Discussion**

Ms. McCleary stated that the Committee needs to identify entities between which agreements are needed in order to advise the lawyers on developing such agreements. Ms. McCleary asked for direction from the Committee as to what different combinations need to be covered by one or more standard legal agreements. Mr. Mix stated there needs to be one standard agreement between the Commonwealth & Core Services Gateway Structure. Mr. Pollack suggested that the Committee needs a set of several agreements; one universally applicable to healthcare, another more general, and some variations in between.

Lesliann Helmus, VDH, addressed the Committee. She stated she believes simplicity is important; perhaps having a few basic agreements which include a hierarchy and, within that, there may need to be exclusions statements. She noted that most data will include some level of identifiers needing some sort of protection.

Chairman Ruffin said the lawyers will come up with these agreements but the Committee will be asked for input. Mr. Pollack stated there are published standardized agreements that the Committee can peruse as examples. After much discussion, the Committee agreed to have its lawyers look over the DURSA to see whether it can be adapted to fit the needs of the Committee ( i.e., one agreement between the Gateway and the COV/HIE).

## **NEW BUSINESS:**

### **VITA and MITA Program Support**

Mr. Simonoff gave a brief update on VITA's specific role in supporting the MITA program (see *VITA Support for the HHR/MITA Program* presentation.) He stated that, due to State budget constraints, a full staff has not yet been hired and resource availability necessary to operate the program is contingent upon receipt of funding. He also reviewed the staffing needs.

### **MITA Program Status Report**

Mr. Mix updated the Committee on MITA activities including immediate focus areas, work in progress, challenges and timelines (see *MITA/HITSAC Program Update* presentation.) He stated the HHR PMO work group has completed its initial work and the Technical Infrastructure work group continues. The next steps for that work group are to firm up plans and costs. Mr. Mix shared that the State Self Assessment sessions have concluded and the transition plan is being updated, which will be sent to CMS and will be posted online. Mr. Mix said he will send a link to Ms. McCleary when it is available. He stated the MITA Care Management and MITA Member Management workgroups have completed their work. He noted that the final rule has been issued by CMS for MITA Member Management and that the Portal is waiting on funding, which should be completed in early May.

Mr. Mix remarked that completion of the technical infrastructure and its environments and development of a cost allocation model continue to be challenges. He noted VITA has a model approved for HHS but how that will apply to SOA has yet to be determined and will evolve over time. He stated Medicaid dollars will stand this up initially until other programs begin to use the service and pay their proportionate share. Ms. McCleary asked for clarification – if Medicare is the only customer, will Medicare bear the entire support cost? Mr. Mix affirmed that there is funding available to cover the program until other users come on board. Mr. Mix noted another challenge is that the DSS portal effort must be completed and synchronized with DMV MPI/CAS availability along with federal review and approval cycles.

Mr. Mix stated the planning timeline has not changed.

Ms. Barnes stated that the COV/HIE contract is still on schedule for award in July at this time, though there are still challenges to overcome.

Mr. Brown asked about MPI products. Mr. Mix stated that this is part of the technical infrastructure and is still being evaluated. He noted VITA has looked at three major vendors, has had demonstrations and received costing but no decision has been made.

### Searchable Standards Repository – Prototype Demonstration

Ms. McCleary stated that, in anticipation of what the Committee came up with in the Governance Framework, it became obvious that it would be difficult for someone to figure out how to find one specific standard in a single PDF version of a document. She said that Ms. Heard has been working on a prototype for a searchable Standards Repository using the free version of the enterprise business intelligence tool. The full licensed version of the program, Logi XML, has been ordered.

Ms. Heard demonstrated the functions available through the searchable Standards Repository she is developing. The Committee was impressed by the prototype stating it is very comprehensive and unique. Chairman Ruffin asked how the Repository will be kept current. Ms. McCleary stated that is one of the tasks of the Master Data Governance Group. She said the Repository will be publically accessible through the VITA website and could be up and running, at least in part, by the next HITSAC meeting.

Ms. McCleary asked for suggestions on the prototype. Chairman Ruffin stated he did not see a link to who is using the Standard. Ms. Heard stated unless the user reports back to VITA, they would not know who has used the Standard, though eventually this information could be tracked. Chairman Ruffin felt it would be valuable for the Agencies to see who is using which Standard and in what context. Ms. McCleary stated this could possibly be developed over time via data stewards but the challenge outside this context would be keeping it up to date. Mr. Mix stated Agencies will want to use the Commonwealth's SOA infrastructure and that there shouldn't be any way to access that infrastructure without using the standards defined in the Standards Repository. Ms. McCleary stated there are agencies with their own enterprise service buses now. Chairman Ruffin asked, for those Agencies dealing with people, can we expect them to keep state government informed about the Standards they are using via a policy. Ms. McCleary stated she thought the best bet is to get Agencies actively participating; if value is shown, Agencies will want to provide the information but it will always be voluntary.

### Health Vocabulary and Messaging Standards Status Report

Health Vocabulary Data Standard: Ms. McCleary remarked that Ms. Heard has been working on this and the Agencies have been through at least one review (see *Enterprise Architecture Health Vocabulary Data Standard* presentation.) She noted that the Standard has been reorganized since the last HITSAC meeting to make it easier to read and there are two empty sections, *Governance (pg 1)*, and *Scope (pg 3)*, pending approval of the governance framework discussed earlier.

Ms. Heard walked the Committee through the Report. Ms. McCleary wondered if we need to include, for example, the code on Dental Procedures & Nomenclature, in the Health Vocabulary Data Standard. She questioned if it is included, how would HITSAC expect this Standard to be used. Chairman Ruffin

thought the code should be included and could be used for such things as auto accidents in description of injuries to the mouth, in dental clinics and by dentists exchanging information. The Committee discussed what instructions should be given for use of the codes -- should the document include how they must be used, or how they may be used. For the time being, the Committee agreed that the word **use** will be replaced by the word **example**, thus not telling people exactly how to use the information. Chairman Ruffin suggested that the Committee members ask colleagues to give an example or two of each in order to begin acquiring examples.

Ms. Heard requested feedback on the Food and Drug Administration Center for Drug Evaluation and Research Data Standards Manual (FDA/CDER DSM) and Medicare Severity Diagnosis Related Groups (MS DRG) items. The Committee suggested contacts for the former and Mr. Mix offered to provide a DMAS contact to assist with the outstanding questions.

Health Interoperability Data Standards: Ms. McCleary stated this section has also been reformatted and there are two empty sections, *Governance (pg 1)*, and *Scope (pg 3)*, pending approval of the governance framework discussed earlier.

Ms. Heard asked for clarification on the terms *clinical document* and *service*. Chairman Ruffin defined *clinical document* as “patient specific clinical information.” Mr. Mix suggested she take the service definition straight out of HL7. He further suggested she look at the SOA terminology and how they define these as a service acts on a document it receives (verb). Ms. McCleary stated she and Ms. Heard will work on this and will report back at the May HITSAC meeting.

Ms. Heard asked for clarification on certain Messaging Standard Descriptions (pg 7-9). Mr. Mix stated he would ask Karen Rowson to help with this section. Ms. Heard noted that the word **use** will be changed to the word **example** as discussed earlier.

Ms. Heard noted Guidance Documents (pg 33) were included simply as guidance based on Mr. Quinn's recommendation. Ms. McCleary suggested she speak with VITA Security about whether we leave them as guidance or somehow do something more with them. Ms. McCleary also stated she will speak with VITA Security and Todd Kissam about what guidance items should be removed.

### **COV-HIE Topic Report: Status and Next Steps**

Ms. McCleary announced that the COV-HIE Topic Report is now officially part of the Enterprise Architecture Standard (see the *COV-HIE Topic Report* presentation.) She stated that many of the listed Standards are out of date as HITSP is now static. Ms. McCleary walked through some examples and recommended language to be added to the Enterprise Architecture Standard. There was discussion around the maintenance frequency for the standards; the Committee agreed it should occur at least quarterly. Ms. McCleary stated she anticipates having one person within VITA whose job it would be to understand the national standards and to maintain the standards versions. Chairman Ruffin said each standard needs to have a statement indicating when it was last reviewed.

### **Committee Questions to Speakers**

Chairman Ruffin asked whether any Committee members wanted to ask questions or make statements to any of the speakers. There were none.

## Public Comment

Chairman Ruffin invited comments from the public. Ms. Tyson addressed the Committee. She wondered if hospitals will be adopting ELINCS, a messaging standard based on HL7.2.5.1 that is being developed by a consortium and has been used as an alternative to an HL7 message, for ambulatory care messaging for lab orders and results. Chairman Ruffin did not know whether UVA will be adopting ELINCS. Mr. Pollack and Mr. Brown stated they don't believe their systems will be using ELINCS. Ms. Tyson stated she will send her notes on the components that are missing from ELINCS to Ms. McCleary so this issue can be further discussed at a later date. Ms. Tyson also noted that there is certain demographic or test specific data collected up front when placing the lab order when using ELINCS. She asked the Committee whether the question response set could be standardized across the hospital community. It was agreed upon that Ms. McCleary and Chairman Ruffin will meet separately with Ms. Tyson to discuss possible amendments to the COV-HIE Topic Report based on the ELINCS work. Mr. Mix stated he will reach out to the Hospital Association and other Committee members were asked to poll their organizations.

Ms. Tyson wondered if all Agencies will, at some point, have the ability to make inter-collaborative comments on new Standards being posted in the Repository. Ms. McCleary stated she would bring the question to VITA for consideration. Ms. Tyson was also concerned about some of the Guides and Standards in the Repository since some are HL7 proprietary which require an HL7 membership to access this. Ms. McCleary stated there will be links to published implementation guides for those who have privileges and rights to access. Regarding HL7 Enterprise membership, Ms. McCleary stated that Mr. Quinn will be talking with his leadership at HL7 as they are revisiting membership. She did inquire as to whether VITA could purchase an Enterprise membership and the response from HL7 was that the membership levels are under review and that government memberships tend to be with individual Federal Agencies rather than states covering multiple state agencies.

Regarding the ONC IT Strategic Plan, Ms. Tyson wondered whether HITSAC will be issuing any comment. Dr. Ruffin stated he believe it was beyond HITSAC's charter and therefore will not be making comment. The Committee encouraged DCLS to comment as a Public Health Lab.

Chairman Ruffin called for other public comment. There was none.

## Adjourn

As there was no further business, Chairman Ruffin adjourned the meeting at 3:04 p.m.